AMENDMENTS TO THE SPECIFICATION

Please amend page 7, 5th paragraph, starting at line 28, as follows:

Preferably the polypeptides of the invention do not contain one or more amino acid residues from upstream of the sequence shown in Figure 1 from the sequence shown as FLJ10330. That is one or more amino acids before MTI~~GEMLR~~... etc. found in sequence FLJ10330.

Please amend page 8, 1st paragraph starting at line 1, as follows:

The nucleic acid molecules encoding T128 (SEQ ID NO: 1) according to the invention and the polypeptides which they encode are detectable by SEREX (discussed below). The technique uses serum antibodies from cancer patients to identify the molecules. It is therefore the case that the gene products identified by SEREX are able to evoke an immune response in a patient and may be considered as antigens suitable for potentiating further immune reactivity if used as a vaccine.

Please amend page 9, last paragraph starting at line 27 through page 10 line 14, as follows:

The nucleic acid molecules may be used to form DNA-based vaccines. From the published literature it is apparent that the development of protein, peptide and DNA based vaccines can promote anti-tumour immune responses. In pre-clinical studies, such vaccines effectively induce a delayed type hypersensitivity response (DTH), cytotoxic T-lymphocyte activity (CTL) effective in causing the destruction (death by lysis or apoptosis) of the cancer cell and the induction of protective or therapeutic immunity. In clinical trials peptide-based vaccines have been shown to promote these immune responses in patients and in some instances cause the regression of secondary malignant disease. Antigens expressed in prostate cancer (or other types of cancers) but not in normal tissue (or only weakly expressed in normal tissue compared to cancer tissue) will allow us to assess their efficacy in the treatment of cancer by immunotherapy. Polypeptides derived from the tumour antigen may be administered with or without immunological adjuvant to promote T-cell responses and induce prophylactic and therapeutic immunity. DNA-based vaccines preferably consist of part or all of the genetic sequence of the tumour antigen inserted into an appropriate expression vector which when injected (for example via the intramuscular, subcutaneous or intradermal route) cause the production of protein and subsequently activate the immune system. An alternative approach to therapy is to use antigen presenting cells (for example, dendritic cells, DC's) either mixed with or pulsed with protein or peptides from the tumour

antigen, or transfect DC's with the expression plasmid (preferably inserted into a viral vector which would infect cells and deliver the gene into the cell) allowing the expression of protein and the presentation of appropriate peptide sequences to T-lymphocytes or adaptive cellular therapy using, *e.g.*, T-cells responsive to T128 peptides or T128 protein (SEQ ID NO: 1). A DNA based vaccine is demonstrated in, for example, Thompson S.A., *et al.* (J. Immunol. (1998), Vol. 160, pages 1717-1723).

Please amend page 12, line 11, as follows:

T128 polypeptide amino acid sequence, SEQ ID NO: 1.